THIRD PARTY NOTIFICATION APPLICATION

MAIL TO:

ESTER BIVONA, RECEIVER OF TAXES 100 MAIN STREET HUNTINGTON, NY 11743

<u>A.</u> I request that a duplicate of any tax bill or statement of unpaid taxes with respect to my property as described below be mailed to the person whom I have designated.

In making this request I understand that neither the tax collecting officer nor any other local government employee has any liability if for any reason the duplicate is not mailed to or not received by my designee.

TO BE COMPLETED BY ASSESSED OWNER

ASSESSED OWNER (LAST NAME FIRST)			
MAILING ADDRESS			
POST OFFICE	STATE	ZIP CODE	
PROPERTY TAX MAP NUMBER (DISTRICT-	SECTION-BLOCK-LO	Γ)	
SIGNATURE		DATE	
TO BE COMPLETED	BY THIRD PARTY		
THIRD PARTY NAME (LAST NAME FIRST))		
MAILING ADDRESS			
POST OFFICE	STATE	ZIP CODE	
DAYTIME TELEPHONE NUMBER			
THIRD PARTY SIGNATURE		DATE	
B. THE APPLICANT IS: (CHECK ONE)	AT LEAST 65 YR DISABLED		
I AGREE TO PROVIDE ANY DOCUMENTA THE ABOVE CONDITION.	ATION NECESSARY 1	TO SUBSTANTIATE	
	SIGNATURE OF APP	SIGNATURE OF APPLICANT	